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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Mayoud et al.
Appl. No. : 09/914,303
Filed : 10/29/01
I.A. No. : PCT/EP00/01312
I.A. Filing Date: 02/18/00
Priority Date : 02/27/99
Title : CLEANING AGENTS FOR HARD SURFACES

Grp./A.U. : Unknown
Examiner : Unknown

Docket No. : H 3888 PCT/US

TRANSMITTAL OF DECLARATION
UNDER 37 CFR SECTION 1.494/5(c)

Commissioner for Patents
Box PCT
Washington, D.C. 20231

Attn: DO/EO/US

Sir:

No original declaration or oath was filed earlier herein. Accordingly, enclosed is the original declaration or oath for this application.

Please charge our Deposit Account No. 50-1177 in the amount of \$130.00 as prescribed by 37 CFR 1.492(e) for the surcharge and processing fee for filing a declaration on a date later than 20/30 months after the priority date of the application.

This sheet is enclosed in triplicate along with an executed declaration. Order No.

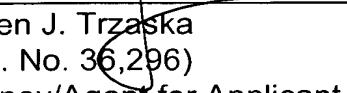
01-0679. Authorization is also granted to charge any deficiency to Deposit Acct.

50-1177.

Respectfully submitted,

12/11/2001 LLANDGRA 00000111 501177 09914303
01 FC:154 130.00 CH

Cognis Corporation
2500 Renaissance Blvd., St. 200
Gulph Mills, PA 19406


Steven J. Trzaska
(Reg. No. 36,296)
Attorney/Agent for Applicant
(610) 278- 4929

Type a plus sign (+) inside this box →

0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket Number</td> <td style="width: 50%;">H 3888 PCT/US</td> </tr> <tr> <td>First Named Inventor</td> <td>Mayoud, Beatrice</td> </tr> <tr> <td colspan="2" style="text-align: center;"><i>COMPLETE IF KNOWN</i></td> </tr> <tr> <td>Application Number</td> <td>09/914,303</td> </tr> <tr> <td>Filing Date</td> <td>10/29/01</td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> </table>	Attorney Docket Number	H 3888 PCT/US	First Named Inventor	Mayoud, Beatrice	<i>COMPLETE IF KNOWN</i>		Application Number	09/914,303	Filing Date	10/29/01	Group Art Unit		Examiner Name	
Attorney Docket Number	H 3888 PCT/US															
First Named Inventor	Mayoud, Beatrice															
<i>COMPLETE IF KNOWN</i>																
Application Number	09/914,303															
Filing Date	10/29/01															
Group Art Unit																
Examiner Name																
<h2 style="margin: 0;">DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</h2>																
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 45%;"> <input type="checkbox"/> Declaration Submitted with Initial Filing </div> <div style="width: 10%; text-align: center;">OR</div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing </div> </div>																

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CLEANING AGENTS FOR HARD SURFACES

(Title of the Invention)

the specification of which

• ☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

02/18/2000

as United States Application Number or PCT International

Application Number

PCT/EP00/01312

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
199 08 563.3	Germany	02/27/1999	<div style="border: 1px solid black; height: 100%; width: 30px;"></div>	<div style="border: 1px solid black; height: 100%; width: 30px;"></div> <div style="border: 1px solid black; height: 100%; width: 30px; text-align: center;">X</div>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/01312	02/18/2000	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label
OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach	32,891	Steven J. Trzaska	36,296
Aaron E. Ettelman	42,516	Henry E. Millson, Jr.	18,980

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label **23657** OR ☐ Fill in correspondence address below

Name	Steven J. Trzaska				
Address					
Address					
City		State		Zip	
Country		Telephone	610-278-4929	Fax	610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name Beatrice Middle Initial Family Name MAYOUD Suffix e.g. Jr.

Inventor's Signature 31/07/01 [Signature] Date 21/08/01

Residence: City Perthes en Gatinais State Country France Citizenship French FOX

Post Office Address 19, Chemin de la Fontaine Monceau

Post Office Address

City 77930 Perthes en Gatinais State Zip Country France Applicant Authority

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box → ☐

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	<u>2nd Daniel</u>	Middle Initial		Family Name	<u>DUFAY</u>	Suffix e.g. Jr.			
Inventor's Signature					Date	<u>21/08/07</u>			
Residence: City	<u>Courtenay</u>	State		Country	<u>France</u>	Citizenship	<u>French FRX</u>		
Post Office Address	<u>9, Route de Montargis</u>								
Post Office Address									
City	<u>45320 Courtenay</u>	State		Zip		Country	<u>France</u>	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City	<u>40789 Monheim</u>	State		Zip		Country	<u>Germany</u>	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country		Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country		Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
City		State		Zip		Country		Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

40789 Monheim